



# COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

KENNETH HAHN HALL OF ADMINISTRATION  
500 WEST TEMPLE STREET, ROOM 437  
P. O. BOX 514917  
LOS ANGELES, CALIFORNIA 90051-4917



**MARK J. SALADINO**  
TREASURER AND TAX COLLECTOR

November 27, 2002

Telephone  
(213) 974-2101  
Telecopier  
(213) 626-1812

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, CA 90012

Dear Supervisors:

## **REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT (ALL DISTRICTS AFFECTED - 3 VOTES)**

### **IT IS RECOMMENDED THAT YOUR BOARD:**

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the compromise offers of settlement from the following individuals who were injured in a third party compensatory accident and who received medical care at a County facility:

Lyle R. Johnson, in amount of \$23,897  
Jerry Jasso, in amount of \$9,409.16  
Tamela J. Binkley, in amount of \$1,783.88  
Paul Eaton, in amount of \$7,072.94  
Stephen L. Fleetwood, in amount of \$1,550

### **JUSTIFICATION:**

The best interest of the County would be served by the approval of this recommendation and the County Counsel concurs.

**PURPOSE OF RECOMMENDED ACTION:**

The compromise offers of settlement are recommended because the patients, estates, or legally responsible relatives are unable to pay the charges.

**Implementation of Strategic Plan Goals:**

This action is consistent with the Countywide Strategic Plan Goal of Fiscal Responsibility in pursuing collection of charges owed for County services.

**FISCAL IMPACT:**

The County will recover partial payment from a third party against debts, otherwise uncollectible due to the limited financial resources of the individuals who received the medical care.

Respectfully submitted,



MARK J. SALADINO  
Treasurer and Tax Collector

MJS:DA:tr

e:Comp.50

Attachments

c: Chief Administrative Officer  
County Counsel

APPROVED  
LLOYD W. PELLMAN  
County Counsel

By 

## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 50A  
DATE: November 27, 2002

Amount of Aid	\$124,352.00	Account Number	10543374
Amount Paid	650.00	Name	Johnson, Lyle R.
Balance Due	123,702.00	Service Date	08/09/99 to 04/02/00
Compromise Amount Offered	23,897.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$ 99,805.00	Service Type	Inpatient/Outpatient

### JUSTIFICATION

Mr. Johnson was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$124,352.00, of which Medi-Cal paid \$650.00. Medi-Cal also paid \$12,191.91 for charges at non-County facilities. The State Department of Health Services will accept \$2,310.00 to satisfy their lien.

The client has settled the case for the amount of \$100,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 40,000.00	\$ 33,333.33	33.33%
St. Joseph's Medical Center	27,353.00	5,280.00	5.28%
State Dept. of Health Services	12,841.91	2,310.00	2.31%
Bruce Broukhim, M.D.	6,656.00	1,320.00	1.32%
University Imaging Center	2,150.00	330.00	0.33%
Hillside Medical Group	475.00	66.00	0.07%
Ina Hocutt, P.T.	126.00	15.00	0.01%
County of Los Angeles	123,702.00	23,897.00	23.90%
Net to Client	N/A	33,448.67	33.45%
<b>Total</b>	<b>\$213,303.91</b>	<b>\$100,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that Mr. Johnson is unemployed and receives disability insurance. He has no other source of income or tangible assets.

## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 50B  
DATE: November 27, 2002

Amount of Aid	\$32,328.00	Account Number	10573108
Amount Paid	.00	Name	Jasso, Jerry
Balance Due	32,328.00	Service Date	06/07/00 to 06/13/00
Compromise Amount Offered	9,409.16	Facility	LAC USC Medical Center
Amount to be Written Off	\$22,918.84	Service Type	Inpatient/Outpatient

### JUSTIFICATION

Mr. Jasso was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$32,328.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$32,500.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$13,000.00	\$10,254.10	31.55%
Attorney Cost	1,737.69	1,737.69	5.35%
Dr. Prakash	1,917.00	557.82	1.71%
Glendale Memorial Hospital	985.00	287.12	0.88%
County of Los Angeles	32,328.00	9,409.16	28.95%
Net to Client	N/A	10,254.11	31.56%
<b>Total</b>	<b>\$49,967.69</b>	<b>\$32,500.00</b>	<b>100.00%</b>

Our financial investigation reveals that Mr. Jasso is unemployed and has no tangible assets.

## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 50C  
DATE: November 27, 2002

Amount of Aid	\$27,811.00	Account Number	10438159
Amount Paid	0.00	Name	Binkley, Tamela J.
Balance Due	27,811.00	Service Date	11/19/99 to 12/01/99
Compromise Amount Offered	1,783.88	Facility	Harbor UCLA Medical Ctr.
Amount to be Written Off	\$26,027.12	Service Type	Inpatient/Outpatient

### JUSTIFICATION

Ms. Binkley was involved in an automobile versus automobile accident. She was treated at Harbor UCLA Medical Center at a cost of \$27,811.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$4,713.45	31.43%
Attorney Cost	1,859.64	859.64	5.73%
Healthcare Recoveries	9,854.00	631.92	4.21%
Vermont Care Center	3,855.08	247.31	1.64%
Little Company of Mary	31,968.00	2,050.35	13.67%
County of Los Angeles	27,811.00	1,783.88	11.89%
Net to Client	N/A	4,713.45	31.43%
<b>Total</b>	<b>\$80,347.72</b>	<b>\$15,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that Ms. Binkley supports herself and family of two with a marginal income. She has no other source of income or tangible assets.

# DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 50D  
DATE: November 27, 2002

Amount of Aid	\$281,494.00	Account Number	10632416
Amount Paid	.00	Name	Eaton, Paul
Balance Due	281,494.00	Service Date	03/26/01 to 09/14/01
Compromise Amount Offered	7,072.94	Facility	MLK Drew Medical Ctr. Harbor UCLA Medical Ctr.
Amount to be Written Off	\$274,421.06	Service Type	Inpatient/Outpatient

Mr. Eaton was involved in a motorcycle accident. He was treated at Martin Luther King Drew Medical Center and Harbor UCLA Medical Center at a cost of \$281,494.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 10,000.00	\$ 8,333.33	33.33%
Attorney Cost	464.40	464.00	1.86%
Los Angeles City Fire Department	632.50	0.00	0.00%
Providence Holy Cross Med. Ctr.	39,980.62	4,000.00	16.00%
Providence Holy Cross Emerg. Rm	1,600.00	0.00	0.00%
CA Emergency Phys.	385.00	0.00	0.00%
Professional Imaging Med. Group	1,208.00	0.00	0.00%
Advanced Cardio Inter. Med. Grp.	85.23	0.00	0.00%
Pathology Assoc. of So. California	343.26	0.00	0.00%
County of Los Angeles	281,494.00	7,072.94	28.29%
Net to Client	N/A	5,129.73	20.52%
<b>Total</b>	<b>\$336,193.01</b>	<b>\$25,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that Mr. Eaton is unemployed and receives General Relief. He has no other source of income or tangible assets.

## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 50E  
DATE: November 27, 2002

Amount of Aid	\$81,627.00	Account Number	10590006
Amount Paid	.00	Name	Fleetwood, Stephen L.
Balance Due	81,627.00	Service Date	09/24/01 to 01/15/02
Compromise Amount Offered	1,550.00	Facility	Harbor UCLA Medical Ctr.
Amount to be Written Off	\$80,077.00	Service Type	Inpatient/Outpatient

### JUSTIFICATION

Mr. Fleetwood was involved in an automobile versus automobile accident. He was treated at Harbor UCLA Medical Center at a cost of \$81,627.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$5,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 1,550.00	\$1,550.00	31.00%
Attorney Cost	351.00	351.00	7.02%
County of Los Angeles	81,627.00	1,550.00	31.00%
Net to Client	N/A	1,549.00	30.98%
<b>Total</b>	<b>\$83,528.00</b>	<b>\$5,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that Mr. Fleetwood is unemployed and receives support from SSI. He has no other source of income or tangible assets.